

Substance Abuse 101

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ABUSE AND DEPENDENCY

- **Use**
- **Abuse**
- **Addiction**
- **Dependency**

Theories of Causation

- **Learning Theories**
- **Tension Reduction**
- **Reinforcement Theories**
- **Personality Theories**
- **Moral Model**

Use of Theories

- Understanding the Behavior of Clients
- Formulation and Implementation of Treatment Plan
- Not a Uni-Dimensional Explanation of a Multi-Dimensional Behavior

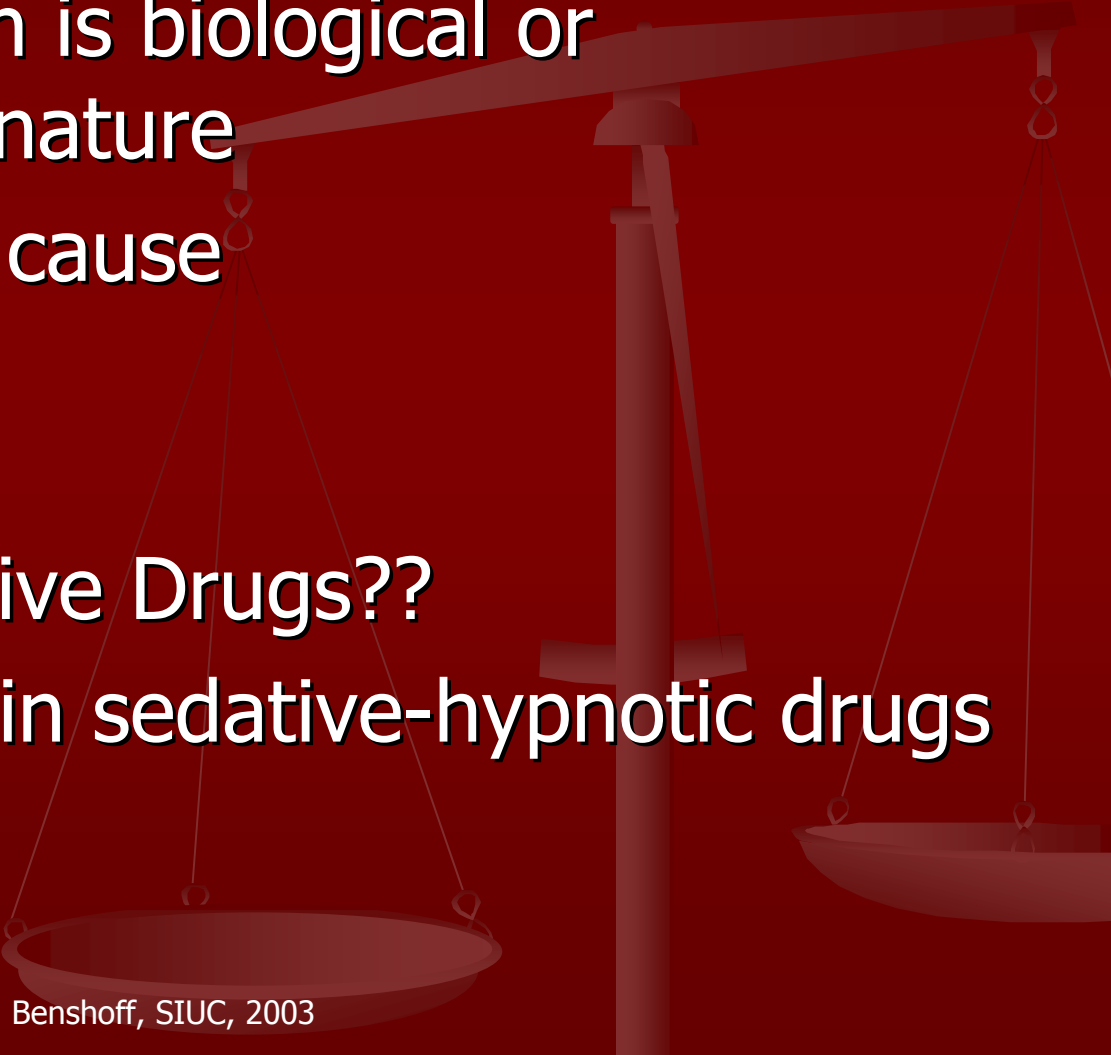
Use

- The consumption of a legal drug for the purpose for which it was intended
- The appropriate, socially acceptable consumption of a legal substance
- Implications??

Abuse

- The consumption of legal substances in a manner different from the intended or prescribed manner.
- A maladaptive pattern of use leading to significant distress or impairment manifested by one of the following
 - Failure to fulfill major life obligations
 - Physically hazardous activities
 - Legal Problems
 - Relationship Problems

Addiction

- Classic Definition is biological or physiological in nature
 - Addictive Drugs cause
 - Tolerance
 - Withdrawal
 - What are Addictive Drugs??
 - Principally seen in sedative-hypnotic drugs
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Tolerance and Withdrawal

■ Tolerance

■ Occurs when

- The body becomes more effective at metabolizing a drug or alcohol, &
 - The central nervous system becomes more insensitive to the drug effects.
- ### ■ The individual requires more of the drug to attain the desired effect.

Withdrawal

- The occurrence of a group of physical symptoms upon cessation of the use of a drug or alcohol
 - Depends on
 - Drug or alcohol type
 - Individual Health
 - Length and Amount of Use
 - In general, withdrawal symptoms will be the opposite of the drug effects

Addiction and Dependency



- Tolerance
 - Pharmacodynamic Tolerance
 - Acute Tolerance
 - Drug Disposition Tolerance
 - Cross Tolerance
 - Behavioral Tolerance
 - Reverse Tolerance
- Withdrawal
 - Non-purposive withdrawal
 - Purposive withdrawal
 - Protracted withdrawal

Dependency

- Incorporates a cluster of cognitive, behavioral, psychological, spiritual and biological constructs
- **Includes Addiction**
- Physical Dependence
- Psychological Dependence
- Behavioral Dependence
- Neurological Dependence

Dependency

- From the DSM IV perspective:
 - Inability to control/decrease consumption
 - Continued consumption despite adverse consequences
 - Compulsive use interfering or supplanting other life events
 - Excessive time devoted to obtaining or using the drug

The Disease Model

Alcoholism is

- Describable
- Progressive and Fatal
- A Disease Entity unto Itself
 - Not a symptom of something else
- Treatable
- A Disease that Effects the Entire Organism

The Disease Model

- Makes Alcoholism a Medical Condition
- Removes the Stigma of the Moral Model
- Transposed to Other Substance Abuse Problems
- Abstinence is the Central Feature
- The Model Espoused by AA and Most Treatment Facilities

Treatment Modalities

- Detoxification
 - Palliative Treatment
- Outpatient Services
- Intensive Outpatient Service
- Inpatient Services
 - 28 day Programs
- Halfway Houses
- Therapeutic Communities

Peer Self Help Groups

- Alcoholics Anonymous
- Narcotics Anonymous
- Cocaine Anonymous
- Gamblers Anonymous
- AL-Anon
- Alateen

Features of Peer Self Help Groups

- Membership is Open to Anyone with a Desire to Quit Drinking or Drugging
- Available in Nearly Every Community
 - Specialized Groups
 - Smokers
 - Gays
 - Hispanics
 - Women
- Anonymity is Central

Features (Cont.)

- Governed by the 12 Steps and 12 Traditions
- Leaderless Groups
- No Dues, Fees, etc.
- Abstinence is Expected & Required
- Open and Closed Groups
 - Open Groups are Open to Anyone
 - Closed Groups are Open to Individuals Already in The Fellowship

Features (Cont.)

Peer Self-Help Groups
are Not Treatment!!